



New Hampshire Community Mental Health Agreement Monthly Progress Report

December 2017

New Hampshire Department of Health and Human Services

February 27, 2018

Acronyms Used in this Report

ACT:	Assertive Community Treatment
BMHS:	Bureau of Mental Health Services
CMHA:	Community Mental Health Agreement
CMHC:	Community Mental Health Center
DHHS:	Department of Health and Human Services
SE:	Supported Employment
SFY:	State Fiscal Year

Background

This Monthly Progress Report is issued in response to the June 29, 2016 Expert Reviewer Report, Number Four, action step 4. It reflects the actions taken in December 2017, and month-over-month progress made in support of the Community Mental Health Agreement (CMHA) as of December 31, 2017. Data contained may be subject to change upon further reconciliation with CMHCs. This report is specific to achievement of milestones contained in the agreed upon CMHA Project Plan for Assertive Community Treatment (ACT), Supported Employment (SE) and Glencliff Home Transitions. Where appropriate, the Report includes CMHA lifetime-to-date achievements.

Progress Highlights

Assertive Community Treatment (ACT)

Goal	Status	Recent Actions Taken
CMHC fidelity to ACT evidence-based practice model annually assessed.	2018: 7 of 10 Completed*	<ul style="list-style-type: none"> 6 reports issued, 1 in development. 4 improvement plans in place; 2 in development process.
Provide ACT team services, consistent with standards set forth, with the capacity to serve at least 1,500 individuals.	Capacity: Dec. – 1,160 Enrollment: Dec. – 887	<ul style="list-style-type: none"> 7 post ACT Fidelity Review consultations with participating CMHCs have occurred during State Fiscal Year 2018 thus far. December newly* enrolled individuals: 26 <p>*New is defined as an individual who is new to the ACT program or an individual who has not received an ACT service in more than 90 days.</p>

Supported Employment (SE)

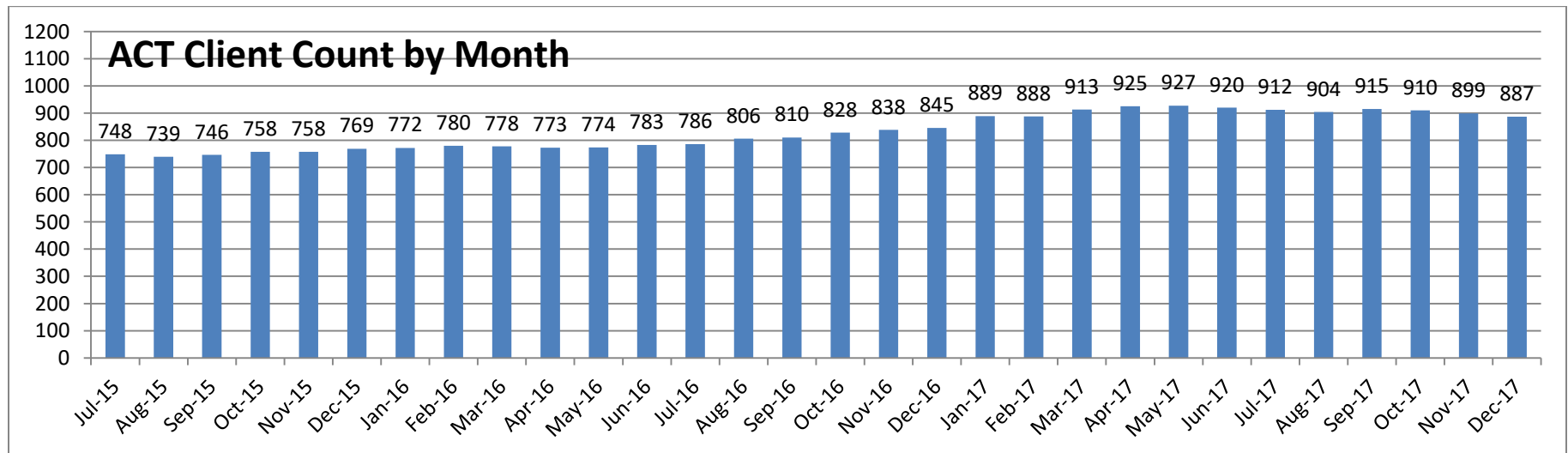
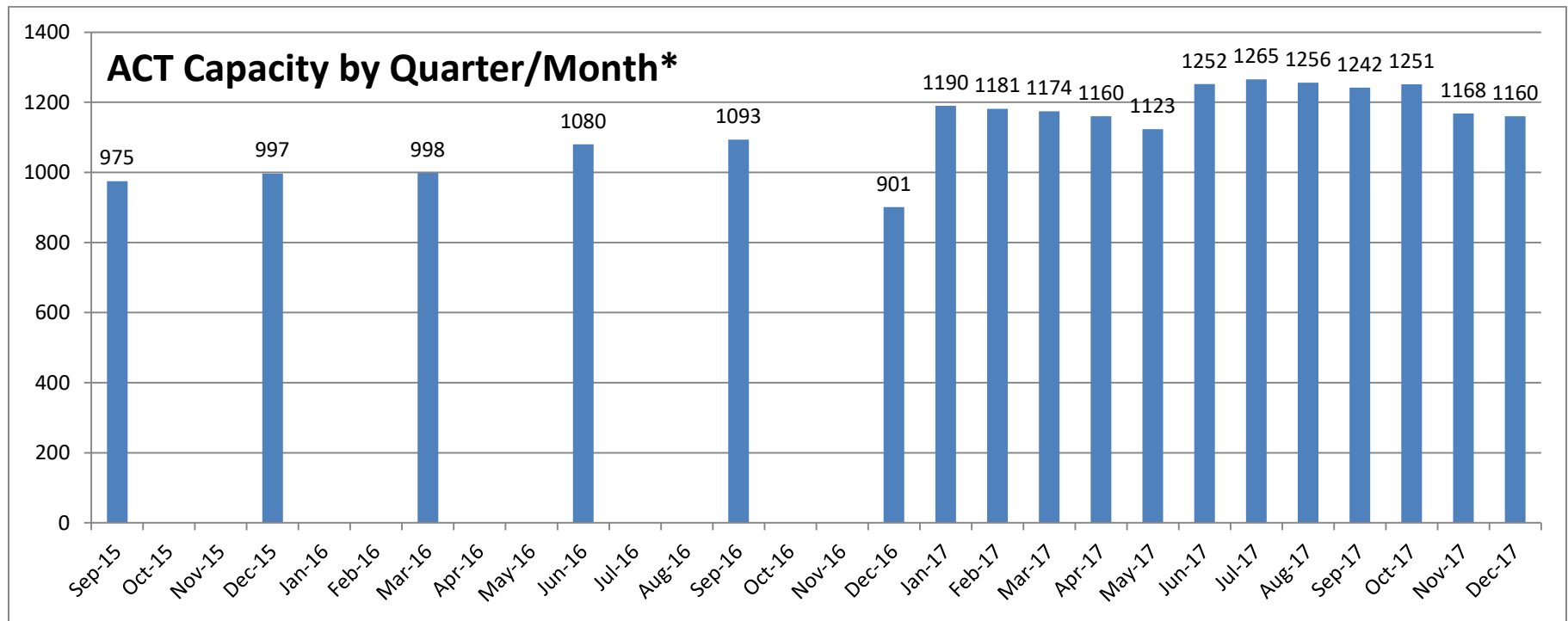
Goal	Status	Recent Actions Taken
CMHC fidelity to SE evidence-based practice model annually assessed.	2018: 6 of 10 completed*	<ul style="list-style-type: none"> 5 fidelity reports issued, 1 in development. 4 improvement plans in place, 1 in development.
Increase penetration rate of individuals with a Serious Mental Illness (SMI) receiving SE services to 18.6%.	Statewide penetration rate: Dec. – 26.7%	<ul style="list-style-type: none"> 3 post SE Fidelity Review consultations with participating CMHCs have occurred during State Fiscal Year 2018 thus far.

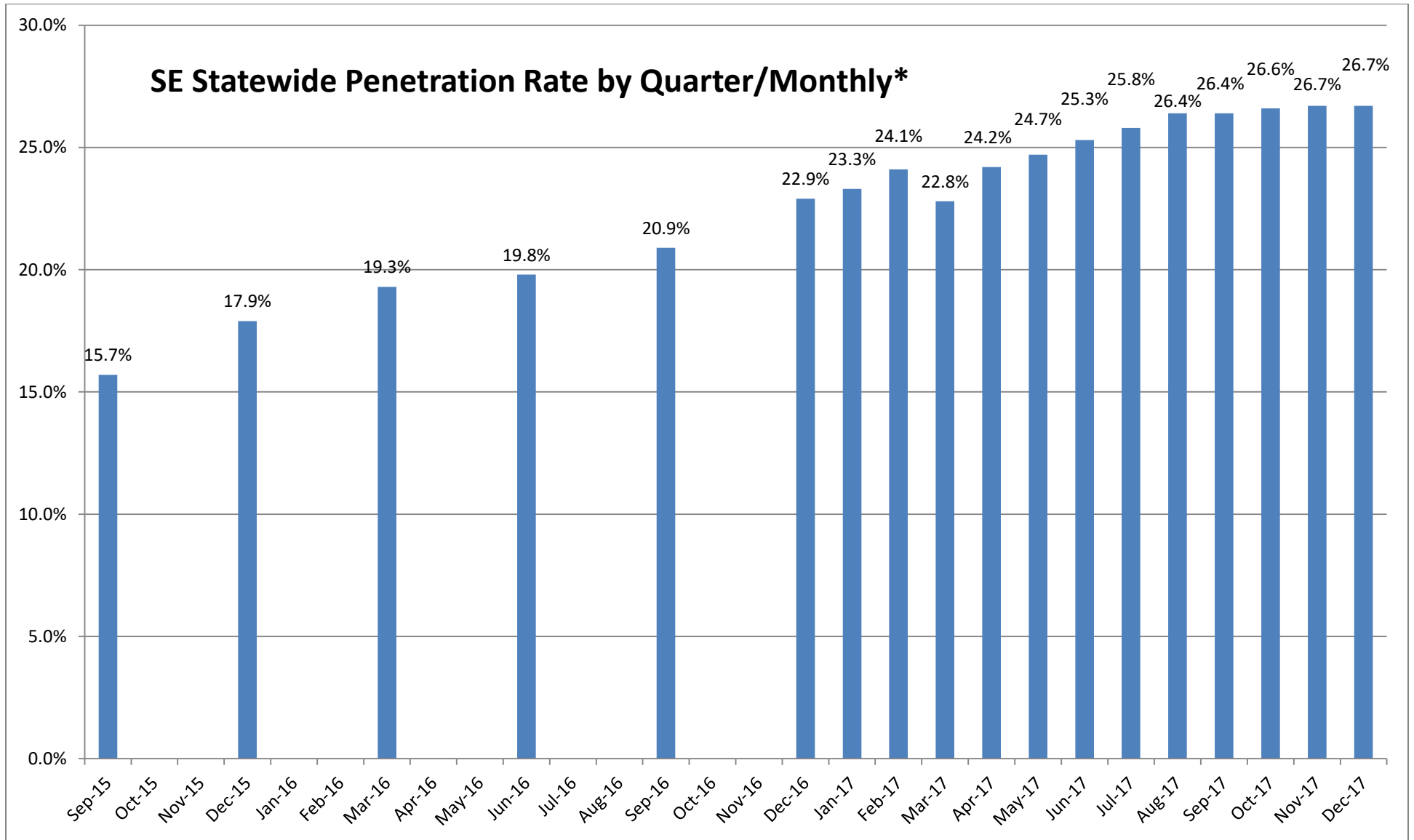
*Information as of report date (not limited to December 31, 2017).

Glencliff Home Transitions into Integrated Community Setting

Goal	Status	Recent Actions Taken
Have capacity to serve in the community 16 (cumulatively) individuals with mental illness and complex health care needs residing at Glencliff who cannot be cost-effectively served in supported housing.	14 of 16 completed ¹	<ul style="list-style-type: none"> In November 2017, a resident transitioned to the community residence developed in late 2016. Coordinating a 15th transition to an independent apartment with supportive services. Needed renovations were completed in February 2018.
By June 30, 2017, identify and maintain a list of all individuals with mental illness and complex health care needs residing at the Glencliff Home who cannot be cost-effectively served in supported housing and develop an effective plan for providing sufficient community-based residential supports for such individuals in the future.	Completed; ongoing	<ul style="list-style-type: none"> 13 residents on the list 11 of the 13 residents have selected their CFI transition case management service provider to actively support transition. 1 individual is in active transition process and is anticipated to move to an independent apartment in March.

¹ Indicates residents have been transitioned into an integrated community setting; compliance with additional CMHA requirements for such transitions is under review.





* Data is a combination of preliminary monthly and finalized quarterly data from CMHA Quarterly Data Reports.